6:India G-3 [illegible]/1933 AVI Kashmir AVI

659 The danger of wilful concealment is greatest in the case of leprosy when the infirm is a woman belonging to a respectable family.

It has long since been recognised that the collection of such information is one of the most unsatisfactory and inaccurate feature of every Indian Census, yet as the errors are to some extent constant, the statistics of distribution and variation are not altogether devoid of comparative value.

Wrong entries such as deaf-mute, lame, white leprosy etc., were, however, found recorded in the schedule as in previous Censuses but these were detected and eliminated during the process of slip-copying. The information were separately extracted from the schedules on slips by a special gang of copyists, whose work was carefully examined and supervised by the inspecting staff. The tabulation having been scrupulously scrutinized, there is little doubt that the compilation of the Infirmity Table has been very accurately accomplished.

The collection of a scientifically accurate data of infirmities can be done in a suitable manner only by trained staff working under the instructions of the Medical officers.

159 732 164 **158. General comparison with previous Censuses.**—The actual number of persons suffering from each infirmity being not available for 1901 Census at which information were recorded for Europeans and Anglo-Indians only, statistics of the four Censuses only are detailed in the marginal table. It is quite evident from the statement that the total number of afflicted persons has increased by 3,938 during the decade under report, which means an increase of 23·18 per cent, in the population of the infirm, compared to an increase of 9·6 per cent. in the total population. The percentage of increase in the number of the afflicted persons in 1911-1921 amounted to 13 per cent. against a corresponding increase of 9·1 per cent. in the total population, and 0·8 per cent. against 9·7 per cent. in the decade 1901-1911. The progressive increase in the number of infirms since 1911 may be ascribed, in part, to the greater accuracy of this Census and partly to the inclusion of weak-minded as insane and of those who are hard of hearing and distinguished as deaf-mute and blind through inaccurate diagnosis or the over-zeal of the enumerating agency.

Infirmity.	1901.	1911.	1921.	1931.
Insanity ...	3,474	3,881	3,559	3,472
Deaf-mutism ...	6,780	6,819	6,945	6,941
Blindness ...	6,889	6,548	6,747	6,984
Leprosy ...	3,888	3,439	3,881	3,887
Total ...	19,979	19,687	19,972	20,284

The proportion of infirms per 100,000 of the population for the last three decades is noted in the margin from which it is obvious that in the case of lunatics, the present decade keeps pace with the past although the other infirmities show a progressive increase during the decade. All the three provinces register an increase in the number of afflicted persons which seems partly due to the more careful enumeration of the present Census and partly due to the amplification of the definitions of leprosy, deaf-mutism since 1911 Census.

Decade.	Percentage of infirms per 100,000 of the population.			
	Insanity.	Deaf-mutism.	Blindness.	Leprosy.
1901-1911 ...	91	100	100	98
1911-1921 ...	93	100	115	91
1921-1931 ...	93	97	100	98

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188. Co-existent Infirmities.—In 1921 Census, cases of double infirmities were almost negligible but at the present Census, these cases of cumulative disfortunes are numerous. The marginal table shows that 133 persons were returned as afflicted with double infirmities, out of which 10 were insane and blind; 6 insane and lepers and 28 blind and lepers while 115 deaf-mutes had additional infirmity associated with them. Leprosy and blindness are both diseases associated with filthy conditions of living and such cases frequently occur in combinations.

Infirmity.	Total.	Males.	Females.
Insanity and deaf-mutism	10	10	10
Insanity and blindness	10	9	9
Insanity and leprosy	6	1	5
Deaf-mutism and blindness	10	10	10
Deaf-mutism and leprosy	10	11	9
Blindness and leprosy	28	10	11
Total of double infirmities	133	102	31

III. INSANITY.

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189. Main Figures.—As already stated in the foregoing paragraphs, the total number of persons returned as insane is 1,424 as compared to 1,238 of the 1921 Census. There are then 10 insane persons per 100,000 of the general population. The marginal table gives the main comparative figures of the prevalence of insanity since 1901. There is an increase of one per 100,000 of population amongst females since 1921 which is just balanced by a corresponding equal ratio of decrease in males.

Year.	Males.	Females.
1901	10	10
1911	10	10
1921	11	11
1931	10	10

190. Insanity by Locality.—The Jhelum Valley tops the list by reporting a proportion of 80 male insanes per 100,000 of population followed by the Outer Hills (47), the Sub-mountane and Semi-mountainous Tract (29) and the Indus Valley (26) in order of enumeration. The largest proportion of female insanes (23) is again reported in the Jhelum Valley Division which is succeeded by the Outer Hills (20) and the Indus Valley (24); but the Sub-mountane and Semi-mountainous Tract (15) becomes the last. Coming to the districts, the small Jagir of Chenani records the highest proportion (118) among males though it stands second in respect of females as will appear on a reference to Subsidiary Table I, appended at the close of the chapter. The highest prevalence of insanity among females is in the hilly district of Gilgit. The difference between the sexes is the least where the female sex comes out to join the male population freely in performing the outdoor occupation. From this point of view, in Rural districts, Poonch Jagir and Ladakh and Gilgit districts of the Indus Valley, where both males and females take an equal share in the struggle for existence, the sexes approach equality in their proportions of insanes to the total population.

191. Insanity by Age and Sex.—Subsidiary Tables II and III record the proportions of the insanes at each age-period by 100,000 and 10,000 of each sex. Hence it would suffice to discuss the figures relating to certain typical age-groups. The first and the last age-periods show a remarkable decrease when compared to 1921 Census as is shown by the marginal statement. The reason for the large decrease under 0-10 can be ascribed partly to the greater accuracy of the statistics collected and partly to better diagnosis on the part of the enumerating agency to whom detailed vernacular instructions to differentiate between

Age-period.	Number of insanes per 10,000 of each sex.			
	Males.		Females.	
	1931	1921	1931	1921
0-10	0.00	0.00	0.00	0.00
10-15	0.00	0.00	0.00	0.00
15-40	0.00	0.00	0.00	0.00
40 and above	0.00	0.00	0.00	0.00

4:India G-3 (2931)1933 AVI Kashmir

158 the various types of infirmity were issued before-hand, while the deficiency in the case of persons aged 60 and over, can be attributed to the fact that infirms do not live long. Another reason usually assigned for the deficit among females is the concealment on the part of ladies who are generally unmarried and the same holds good as far as 0-10 age-period is concerned, because insanity is not a disease of infancy.

163. Insanity by Caste—Since Table III deals with the infirmities by selection castes from which the marginal statement showing insanity by some principal castes has been extracted.

Caste or Community	Population dealt with.		Actual No. of Insane.		No. of Insane per 100,000 of each sex.	
	M	F	M	F	M	F
I. Hindu ..	1,000,000	1,000,000	700	400	67	34
II. Hindu ..	500,000	500,000	170	60	60	21
III. Sudhra ..	17,000	15,000	1	4	6	22
Gaur—						
Jat ..	15,000	11,000	10	10	600	90
Brahmans including Malyals and Kashmiri Pandits) ..	50,000	50,000	40	30	71	57
Kashmiri Hindu ..	100,000	100,000	300	170	30	30
Dhobi ..	10,000	10,000	9	9	90	90
Kahar ..	10,000	10,000	6	..	60	..
Gujar ..	100,000	100,000	80	60	80	60
Rajput ..	60,000	57,000	30	30	50	53
Sahuk ..	11,000	10,000	7	7	60	70
Megh ..	30,000	30,000	10	7	33	23
Khatri ..	12,000	6,000	6	..	50	..
Chamar ..	30,000	30,000	8	8	26	26
Awan ..	10,000	10,000	1	1	9	9

The figures of the main religions show that the proportion of insane males is higher among Muslims and the lowest among the Buddhists.

It is seen that the Brahmans are the highest sufferers (71) from this disease due to the literary brain work involving excessive mental strain as compared to low incidence amongst the Chamars (23) who are engaged in manual work.

The proportion amongst Mahajans, Khatris, Rajputs, Meghs and Dooms are 45, 30, 40, 33 and 40 respectively.

Amongst the Muslims the highest incidence is noticed in the Kashmiri Muslims (33) and the lowest amongst the Awans (9 males).

IV. DEAF-MUTISM.

732 **164. Male Figures**—The total number of sufferers from deaf-mutism recorded at the present Census is 3,707 as compared to 4,513 of 1921 and 3,043 in 1911 Census, which gives the proportion of 130 persons per 100,000 of the population. The marginal table gives comparative figures for deaf-mutes by sex for the last few Censuses.

Year.	Proportion per 100,000 of population.	
	Males.	Females.
1901	106	80
1911	130	87
1921	130	100
1931	130	110

DIAGRAM SHOWING NUMBER OF INFANTS AT CERTAIN AGE PERIODS

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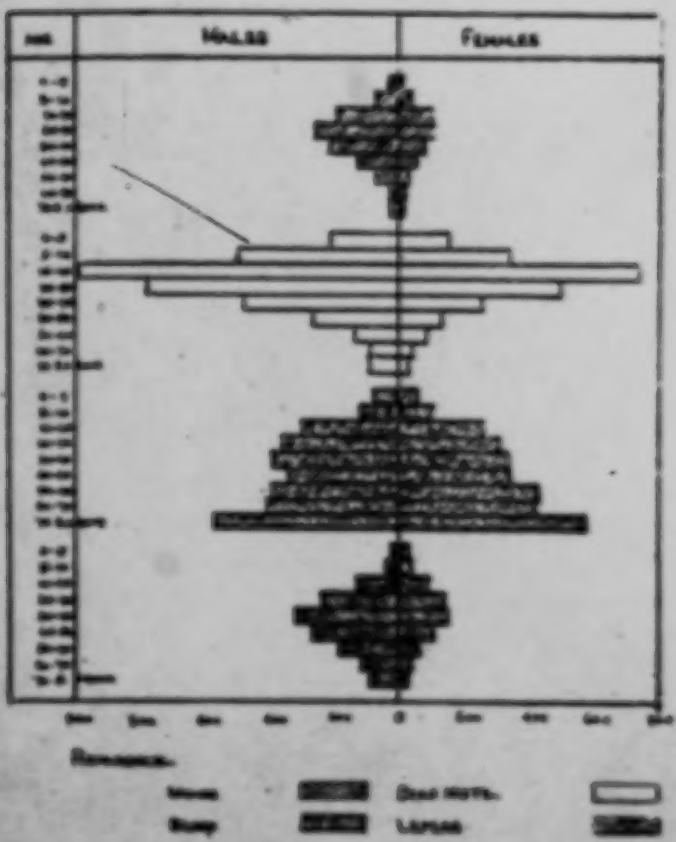

[Facing p. 179]

164 male lepers per 100,000 of afflicted against 68 of the Brahmans and 93 of the Rajputs. The apparent reason for the favourable position of the higher castes seems to lie in better and more hygienic conditions of living and partially also in the intentional concealment of the disease especially among the females.

178. To sum up, it may be remarked that physical environments, climatic conditions and social customs (i.e., inter-breeding, modes of living) are some of the principal factors responsible for the growth of infirmities discussed above.

743 158 177. **Asylums of the Lunatic and Leper Asylums in the State : Lunatic Asylums.**—Only two Lunatic Asylum (one at Srinagar and the other at Jammu) exist in His Highness' territories which are being separately controlled by the Jail Superintendents. It is regretted that for want of detailed information nothing in particular can be discussed regarding these Asylums except that the total number of inmates in the two Asylums was 22 and 7 respectively on the final Census night. In Srinagar all the 22 belonged to the same district but in case of Jammu Asylum, 6 were the residents of the State while the 7th was an immigrant from Mewat.

The total number of admissions in the Srinagar Lunatic Asylum during 1986-87 and 1987-88 was 60 out of which 11 were discharged as cured, 9 discharged otherwise, 10 relieved and 5 dead. Similarly the total admissions to the Jammu Asylum during 1986-87 and 1987-88 were 36 out of which 19 were discharged as cured and 9 discharged otherwise.

There is no up-to-date Lunatic Asylum in the proper sense of the word. In Srinagar though a separate building is provided by the State yet it is not quite adequate for the needs of the Asylum.

743 164 178. **Leper Asylums.**—Four Leper Asylums at different centres namely Jammu, Srinagar, Leh and Poonch are being run by the State for the welfare of the people. The total figures of lepers on roll, on the final Census night was 28 at Jammu and 117 in Srinagar. Out of 28 in case of Jammu 27 belonged to the Muslim community while one was returned as Hindu. 14 immigrants from Agra (U. P.), Budayun (U. P.), Gaya (Bihar) and Calcutta (Bengal) are responsible for raising the number to such an extent although the rest of the sufferers had migrated to this province from the Jehlum Valley.

The detail of 117 lepers reported from Srinagar runs thus :—

> 78 males and 39 females of the different communities comprised of 3 male immigrants from Tapeswar, Kangra and Hoshiarpur (Punjab), 3 males and 2 females and 4 males 3 females from Kishtwar and Reasi respectively while the rest were the residents of the Kashmir Province and the Indus Valley.

Only a care-taking work is attached with the Leper Asylum at Leh and arrangements at Jammu are not quite satisfactory. But the Leper Asylum at Srinagar is to some extent helpful in the treatment of this infirmity to the public.

The total number of persons admitted in both the Asylums during the decade 1921-1931, as available from the Administration Reports of the Medical Department comes to 1,140 (Srinagar 880 and Jammu 260). Figures of expenditure on average diet per patient per day for each year are detailed in the margin. The total cost of maintenance of these Leper Hospitals comes to Rs. 238,931-14-0 (Srinagar Rs. 180,146-10-0 & Jammu Rs. 40,115-4-0) during the decade which works to an average annual expenditure of Rs. 23,893-0-0 and Rs. 3,736-5-1 for Srinagar and Jammu asylums separately.

Years	Cost of average diet per patient per day		
	Rs.	a.	p.
1921			
1922			
1923			
1924 and then the number of [illegible]			
1925-26			
1926-27			
1927-28			

4 [Errata: add brackets of errata sheet, p. 330 category 116 -- Analyst]

SUBSIDIARY TABLE I.

NUMBER APPLICTED PER 100,000 OF THE POPULATION AT EACH OF THE LAST FOUR CENSUSES.

Objects and General Divisions.	Deaths.				Discharges.				Males.				Lunatics.			
	Males.		Females.		Males.		Females.		Males.		Females.		Males.		Females.	
1																

SUBSIDIARY TABLE II.

Number afflicted per 100,000 persons of each age-period and number of females afflicted per 1,000 males.

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Age	Number afflicted per 100,000 persons of each age-period								Number of females afflicted per 1,000 males			
	Diabetes		Deaf-mutism		Blind		Lepers					
	M	F	M	F	M	F	M	F	M	F	M	F
1	2	3	4	5	6	7	8	9	10	11	12	13
0—5	7	6	86	86	76	68	7	7	871	790	794	919
5—10	16	16	108	101	47	48	14	14	790	741	884	848
10—15	16	16	104	108	46	41	16	16	818	748	897	842
15—20	16	16	104	104	46	76	41	46	742	779	885	848
20—25	16	16	107	108	46	46	46	46	784	796	847	896
25—30	76	16	104	107	106	46	76	46	818	796	886	897
30—35	76	46	176	176	107	110	106	46	796	881	896	896
35—40	76	16	176	176	110	106	106	76	884	841	1,010	896
40—45	76	46	176	176	176	207	106	46	884	896	1,000	1,014
45—50	76	46	186	186	186	207	176	76	897	918	1,004	946
50—55	76	46	186	186	186	186	176	76	896	896	1,007	946
55—60	46	46	186	211	186	176	176	76	896	896	1,004	977
60 and over	46	46	176	176	1,007	1,004	186	46	946	896	1,000	946

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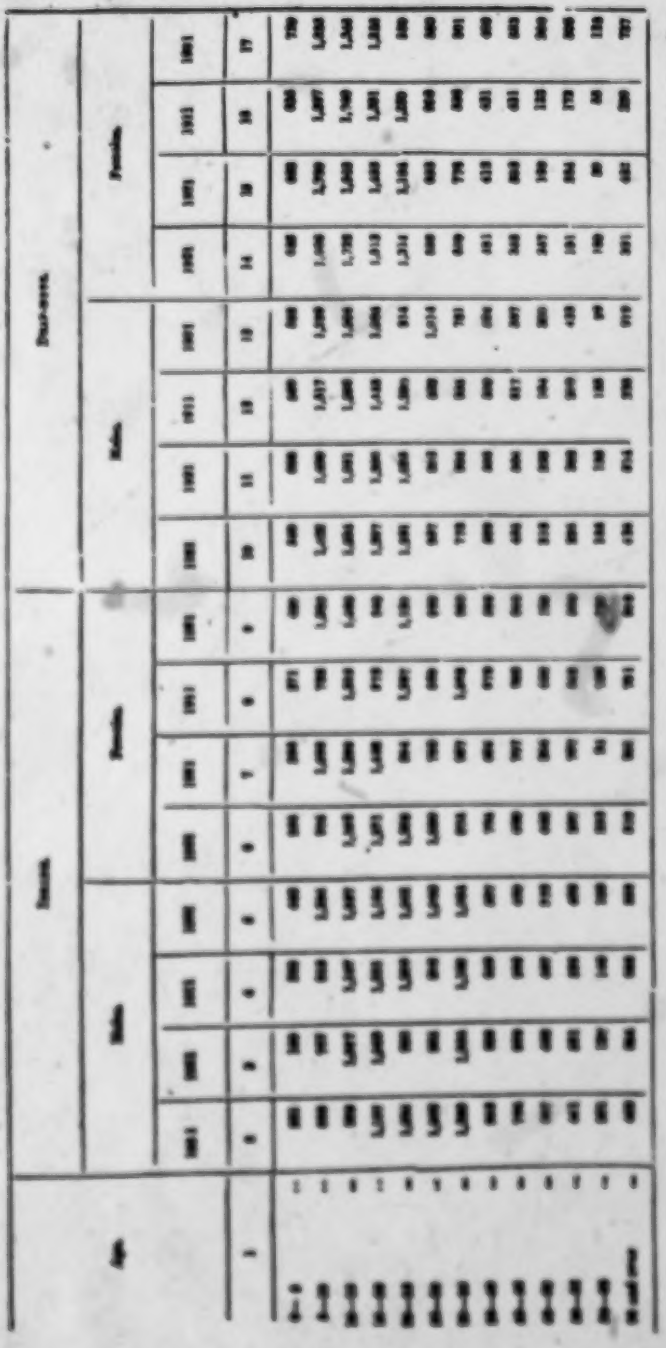
SUBSIDIARY TABLE III.

DISTRIBUTION OF THE INFIRM BY AGE PER 10,000 OF EACH SEX.



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SUBSIDIARY TABLE III—(concluded).

Distribution of the Infirm by Age per 10,000 of each Sex.

Age	Males.				Females.				Males.				Females.			
	1901	1891	1911	1901	1911	1901	1911	1901	1911	1901	1911	1901	1911	1901	1911	1901
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17
0—1 ..																
1—5 ..																
5—10 ..																
10—15 ..																
15—20 ..																
20—25 ..																
25—30 ..																
30—35 ..																
35—40 ..																
40—45 ..																
45—50 ..																
50—55 ..																
55—60 ..																
60 and over ..	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000	5,000